

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Committee to Elect Mark Alliegro

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	85676.80	85676.80
(b) Total Contribution Refunds (from Line 20(d))	25.00	25.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	85651.80	85651.80
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	52920.89	52920.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	52920.89	52920.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	44730.91	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	26404.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Committee to Elect Mark Alliegro

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	55904.70	55904.70
(ii) Unitemized.....	27469.76	27469.76
(iii) TOTAL of contributions from individuals ▶	83374.46	83374.46
(b) Political Party Committees.....	1002.34	1002.34
(c) Other Political Committees (such as PACs).....	1300.00	1300.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	85676.80	85676.80
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	12000.00	12000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	12000.00	12000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	97676.80	97676.80

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	52920.89	52920.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	25.00	25.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	25.00	25.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	52945.89	52945.89

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	97676.80
25. SUBTOTAL (add Line 23 and Line 24).....	97676.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	52945.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	44730.91

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Fred Abbe		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2016	
Mailing Address PO Box 810		Transaction ID : SA11AI.4947	
City Cataumet	State MA	Zip Code 02534	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer retired	Occupation retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) B. Chris & Maria Alex		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 29 / 2016	
Mailing Address PO Box 1594		Transaction ID : SA11AI.4252	
City Harwich	State MA	Zip Code 02645	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer retired	Occupation retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) C. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015	
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6177	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period 32.25	
Name of Employer Self Employed	Occupation Scientist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 228.09		

SUBTOTAL of Receipts This Page (optional).....	1732.25
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6178
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 2.00	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item Citizens Bank fee
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 230.09	

Full Name (Last, First, Middle Initial) B. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 12 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6179
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 23.92	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item Laura's Home Cooking lunch meeting
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 254.01	

Full Name (Last, First, Middle Initial) C. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 14 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6180
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 5.75	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item USPS postage
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 259.76	

SUBTOTAL of Receipts This Page (optional).....	_____ 31.67
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 26 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6181
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 315.00	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item Digicert Campaign setup
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 574.76	

Full Name (Last, First, Middle Initial) B. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6205
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 2.00	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item Citizen's Bank fee
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 576.76	

Full Name (Last, First, Middle Initial) C. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 03 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6185
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 35.99	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item The Fours lunch meeting
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 612.75	

SUBTOTAL of Receipts This Page (optional).....	_____ 352.99
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6186
City East Falmouth	State MA Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period 30.87
Name of Employer Self Employed	Occupation Scientist	<input type="checkbox"/> Memo Item Panera Bread lunch meeting
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 643.62	

Full Name (Last, First, Middle Initial) B. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6187
City East Falmouth	State MA Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period 24.00
Name of Employer Self Employed	Occupation Scientist	<input type="checkbox"/> Memo Item Boston Common Garage parking
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 667.62	

Full Name (Last, First, Middle Initial) C. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6188
City East Falmouth	State MA Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period 0.19
Name of Employer Self Employed	Occupation Scientist	<input type="checkbox"/> Memo Item PayPal fee
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 667.81	

SUBTOTAL of Receipts This Page (optional).....	55.06
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 01 / 2015	
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6189	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period _____ 19.60	
Name of Employer Self Employed	Occupation Scientist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 687.41		
		<input type="checkbox"/> Memo Item USPS stamps	

Full Name (Last, First, Middle Initial) B. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 14 / 2015	
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6190	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period _____ 90.51	
Name of Employer Self Employed	Occupation Scientist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 777.92		
		<input type="checkbox"/> Memo Item Legal Seafood campaign meeting	

Full Name (Last, First, Middle Initial) C. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 15 / 2015	
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6191	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period _____ 200.00	
Name of Employer Self Employed	Occupation Scientist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 977.92		
		<input type="checkbox"/> Memo Item McDougall Interactive campaign set up	

SUBTOTAL of Receipts This Page (optional).....	_____ 310.11
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6192
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item Citizens Bank fee
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1027.92	

Full Name (Last, First, Middle Initial) B. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6193
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 40.59	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item Vertical Response Campaign website
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1068.51	

Full Name (Last, First, Middle Initial) C. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 03 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6194
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 29.40	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item USPS stamps
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1097.91	

SUBTOTAL of Receipts This Page (optional).....	_____ 119.99
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 18 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6195
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 37.14	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item Persy's Restaurant lunch meeting
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1135.05	

Full Name (Last, First, Middle Initial) B. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 18 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6196
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 39.20	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item USPS postage
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1174.25	

Full Name (Last, First, Middle Initial) C. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6197
City State Zip Code East Falmouth MA 02536	Amount of Each Receipt this Period _____ 51.00	
FEC ID number of contributing federal political committee. C H4MA09052	Name of Employer Occupation Self Employed Scientist	<input type="checkbox"/> Memo Item Vertical Response website
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1225.25	

SUBTOTAL of Receipts This Page (optional).....	_____ 127.34
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 03 / 2015	
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6198	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period 160.00	
Name of Employer Self Employed	Occupation Scientist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1385.25		
		<input type="checkbox"/> Memo Item RENEW Mass Coalition	

Full Name (Last, First, Middle Initial) B. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 04 / 2015	
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6199	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period 406.88	
Name of Employer Self Employed	Occupation Scientist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1792.13		
		<input type="checkbox"/> Memo Item Dr. Don's Buttons Marketing	

Full Name (Last, First, Middle Initial) C. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 04 / 2015	
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6200	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period 19.60	
Name of Employer Self Employed	Occupation Scientist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1811.73		
		<input type="checkbox"/> Memo Item USPS stamps	

SUBTOTAL of Receipts This Page (optional).....	586.48
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 08 / 2015	
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6201	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period 100.00	
Name of Employer Self Employed	Occupation Scientist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1911.73		
		<input type="checkbox"/> Memo Item McSally For C	

Full Name (Last, First, Middle Initial) B. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2015	
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6202	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period 444.32	
Name of Employer Self Employed	Occupation Scientist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2356.05		
		<input type="checkbox"/> Memo Item Victory Store.com Marketing	

Full Name (Last, First, Middle Initial) C. Mark Alliegro		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 21 / 2015	
Mailing Address 41 Metoxit Rd.		Transaction ID : SA11AI.6203	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee. C H4MA09052		Amount of Each Receipt this Period 29.40	
Name of Employer Self Employed	Occupation Scientist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2385.45		
		<input type="checkbox"/> Memo Item USPS postage	

SUBTOTAL of Receipts This Page (optional).....	573.72
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Mark Alliegro

Mailing Address 41 Metoxit Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C H4MA09052**

Name of Employer Self Employed Occupation Scientist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2399.58

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11AI.6204

Amount of Each Receipt this Period
 _____ 14.13

Memo Item
 USPS postage

B. Full Name (Last, First, Middle Initial)
Mark Alliegro

Mailing Address 41 Metoxit Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C H4MA09052**

Name of Employer Self Employed Occupation Scientist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2499.58

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2016

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mary Anne Alliegro

Mailing Address 41 Metoxit Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer Aquarium Occupation Biologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2565.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2016

Transaction ID : SA11AI.4913

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 2614.13

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Bryan Anderson

Mailing Address 16 Flax Court

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer Andy's Market Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2016

Transaction ID : SA11AI.4111

Amount of Each Receipt this Period
 2700.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
John Anderson

Mailing Address 30 Whiting St

City Wrentham State MA Zip Code 02093

FEC ID number of contributing federal political committee. **C**

Name of Employer Plumbhouse Occupation contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : SA11AI.4852

Amount of Each Receipt this Period
 250.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City none State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.5138

Amount of Each Receipt this Period
 35.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2985.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City none State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.5139

Amount of Each Receipt this Period
120.00

Memo Item
No Singular Contribution more than \$50.

B. Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City none State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
365.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2016

Transaction ID : SA11AI.5141

Amount of Each Receipt this Period
40.00

Memo Item
No Singular Contribution more than \$50.

C. Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City none State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2016

Transaction ID : SA11AI.5145

Amount of Each Receipt this Period
60.00

Memo Item
No Singular Contribution more than \$50.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

220.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Anonymous Anonymous

Mailing Address none

City none State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **510.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11AI.5142

Amount of Each Receipt this Period
85.00

Memo Item
 No Singular Contribution more than \$50.

B. Full Name (Last, First, Middle Initial)
Harold Banks

Mailing Address PO Box 697

City West Falmouth State MA Zip Code 02547

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 retired retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11AI.4849

Amount of Each Receipt this Period
500.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Brooks & Anne Bartlett

Mailing Address 174 Queen St., Unit 6F

City Falmouth State MA Zip Code 02540

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Bartlett Financial Services president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 26 / 2016

Transaction ID : SA11AI.4197

Amount of Each Receipt this Period
250.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

835.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Maria Batilo		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2016	
Mailing Address 10 Southview Way		Transaction ID : SA11AI.4974	
City East Falmouth	State MA	Zip Code 02536	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period _____ 250.00	
Name of Employer self	Occupation Physician		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		
		<input type="checkbox"/> Memo Item In-kind -Reception expenses	

Full Name (Last, First, Middle Initial) B. Michael Bell		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2016	
Mailing Address 34 Stockade Path		Transaction ID : SA11AI.4645	
City Duxbury	State MA	Zip Code 02332	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period _____ 1000.00	
Name of Employer retired	Occupation retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		
		<input type="checkbox"/> Memo Item Donation	

Full Name (Last, First, Middle Initial) C. Kevin Browne		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2016	
Mailing Address 73 Crestwood Circle		Transaction ID : SA11AI.4643	
City Norwood	State MA	Zip Code 02062	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period _____ 500.00	
Name of Employer Wrentham Co-op Bank	Occupation Banker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		
		<input type="checkbox"/> Memo Item Donation	

SUBTOTAL of Receipts This Page (optional).....	_____ 1750.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Kevin Browne		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016	
Mailing Address 73 Crestwood Circle		Transaction ID : SA11AI.4910	
City Norwood	State MA	Zip Code 02062	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Wrentham Co-op Bank	Occupation Banker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
		<input type="checkbox"/> Memo Item Donation	

Full Name (Last, First, Middle Initial) B. Peter Buckley		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 18 / 2016	
Mailing Address		Transaction ID : SA11AI.4141	
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
		<input type="checkbox"/> Memo Item Donation	

Full Name (Last, First, Middle Initial) C. Carleton Burr		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016	
Mailing Address 27 Pawkechatt Way		Transaction ID : SA11AI.4929	
City Marion	State MA	Zip Code 02738	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Burr Brothers Boats Inc.	Occupation president		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
		<input type="checkbox"/> Memo Item Donation	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
John Cabot

Mailing Address 1 Tucks Point Road

City Manchester State MA Zip Code 01944

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : SA11AI.4961

Amount of Each Receipt this Period
750.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Mary Capizzi

Mailing Address 1645 Santuit Newtown Road

City Cotuit State MA Zip Code 02635

FEC ID number of contributing federal political committee. **C**

Name of Employer Capizzi Home Improvement Occupation contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2016

Transaction ID : SA11AI.4800

Amount of Each Receipt this Period
200.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Louis Carpenito

Mailing Address 256 Hillcrest Rd.

City Marshfield State MA Zip Code 02050

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2016

Transaction ID : SA11AI.4131

Amount of Each Receipt this Period
2700.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Jeanette Carpentino

Mailing Address 256 Hillcrest Rd.

City Marshfield State MA Zip Code 02050

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : SA11AI.4589

Amount of Each Receipt this Period
100.00

Memo Item Donation

B. Full Name (Last, First, Middle Initial)
Jeanette Carpentino

Mailing Address 256 Hillcrest Rd.

City Marshfield State MA Zip Code 02050

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2016

Transaction ID : SA11AI.4682

Amount of Each Receipt this Period
100.00

Memo Item Donation

C. Full Name (Last, First, Middle Initial)
Jeanette Carpentino

Mailing Address 256 Hillcrest Rd.

City Marshfield State MA Zip Code 02050

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **661.13**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2016

Transaction ID : SA11AI.4977

Amount of Each Receipt this Period
261.13

Memo Item In-kind -Reception expenses

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

461.13

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Liberty Chalkboard

Mailing Address 78 Falmouth Landing Road

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2016

Transaction ID : SA11AI.4525

Amount of Each Receipt this Period
 500.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Robert Chamberlain

Mailing Address PO Box 142

City South Dennis State MD Zip Code 02660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 self realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2016

Transaction ID : SA11AI.4531

Amount of Each Receipt this Period
 500.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Mike Chapman

Mailing Address 37 Lenox St.

City Worcester State MA Zip Code 01601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 self botanist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 08 / 2016

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period
 500.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Mike Chapman

Mailing Address 37 Lenox St.

City Worcester State MA Zip Code 01601

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation botanist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11AI.4851

Amount of Each Receipt this Period
250.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Ron & Nancy Church

Mailing Address 46 Riddle Hill Rd

City Falmouth State MA Zip Code 02540

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 22 / 2016

Transaction ID : SA11AI.4159

Amount of Each Receipt this Period
500.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Ron & Nancy Church

Mailing Address 46 Riddle Hill Rd

City Falmouth State MA Zip Code 02540

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 25 / 2016

Transaction ID : SA11AI.4181

Amount of Each Receipt this Period
500.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Ron & Nancy Church

Mailing Address 46 Riddle Hill Rd

City Falmouth State MA Zip Code 02540

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 12 / 2016

Transaction ID : SA11AI.4328

Amount of Each Receipt this Period
50.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Ron & Nancy Church

Mailing Address 46 Riddle Hill Rd

City Falmouth State MA Zip Code 02540

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11AI.4908

Amount of Each Receipt this Period
100.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Tom Constantine

Mailing Address 510 Brook St

City Hanson State MA Zip Code 02341

FEC ID number of contributing federal political committee. **C**

Name of Employer SEMAP Occupation Chief Pilot

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 15 / 2016

Transaction ID : SA11AI.4736

Amount of Each Receipt this Period
250.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Maureen Corbett

Mailing Address 369 Liberty St

City Haverhill State MA Zip Code 01832

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation cpa

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11AI.4627

Amount of Each Receipt this Period
1000.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Larry Cosmo

Mailing Address 10 John Matthew Road

City Hopkinton State MA Zip Code 01748

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.4615

Amount of Each Receipt this Period
250.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
John Crawford

Mailing Address PO Box 181

City East Orleans State MA Zip Code 02643

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.4978

Amount of Each Receipt this Period
250.00

Memo Item
In-kind -Reception expense

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
John Crawford

Mailing Address **PO Box 181**

City **East Orleans** State **MA** Zip Code **02643**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 24 / 2016

Transaction ID : SA11AI.4376

Amount of Each Receipt this Period
100.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Prescott Crocker

Mailing Address **14 Water St.**

City **Marion** State **MA** Zip Code **02738**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 29 / 2016

Transaction ID : SA11AI.4267

Amount of Each Receipt this Period
750.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
Prescott Crocker

Mailing Address **14 Water St.**

City **Marion** State **MA** Zip Code **02738**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 17 / 2016

Transaction ID : SA11AI.4786

Amount of Each Receipt this Period
150.00

Memo Item
Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Michael Cronin		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 09 / 2016
Mailing Address 72 Cliff Road		Transaction ID : SA11AI.4619
City Weston	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Weston Presidio	Occupation venture capital	<input type="checkbox"/> Memo Item Donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Matt Cukierski		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 02 / 2016
Mailing Address 11724 Treadwell Drive		Transaction ID : SA11AI.4457
City Poway	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Takeda California	Occupation Toxicologist	<input type="checkbox"/> Memo Item Donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) C. Matt Cukierski		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016
Mailing Address 11724 Treadwell Drive		Transaction ID : SA11AI.4926
City Poway	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Takeda California	Occupation Toxicologist	<input type="checkbox"/> Memo Item Donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00	

SUBTOTAL of Receipts This Page (optional).....	1900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
John Cullen

Mailing Address 63 Chandler Drive

City Marshfield State MA Zip Code 02050

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation IT specialist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.4979

Amount of Each Receipt this Period
 250.00

Memo Item
 In-kind -Reception event

B. Full Name (Last, First, Middle Initial)
Sandra Dapprich

Mailing Address PO Box 2339

City Duxbury State MA Zip Code 02331

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2016

Transaction ID : SA11AI.4900

Amount of Each Receipt this Period
 250.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Linda Davis

Mailing Address 383 Boxberry Hill Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.4981

Amount of Each Receipt this Period
 250.00

Memo Item
 In-kind -Reception event

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Linda Davis

Mailing Address 383 Boxberry Hill Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.4448

Amount of Each Receipt this Period
 _____ 75.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Mary Lou Daxland

Mailing Address PO Box 3420

City Westport State MA Zip Code 02790

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : SA11AI.4785

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
David DeGhetto

Mailing Address 303 River St

City Norwell State MA Zip Code 02061

FEC ID number of contributing federal political committee. **C**

Name of Employer North River Equipment Co. Occupation Manufacturers Rep

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2016

Transaction ID : SA11AI.4925

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 275.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Henry Dick

Mailing Address 392 Boxberry Hill Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer WHOI Occupation Sr. scientist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 06 / 2016

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period
2000.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Henry Dick

Mailing Address 392 Boxberry Hill Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer WHOI Occupation Sr. scientist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period
250.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
Henry Dick

Mailing Address 392 Boxberry Hill Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer WHOI Occupation Sr. scientist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2016

Transaction ID : SA11AI.4982

Amount of Each Receipt this Period
250.00

Memo Item
In-kind -

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Robert Downer Jr.

Mailing Address 545 Lumbert Mill Road

City State Zip Code
Centerville MA 02632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2016

Transaction ID : SA11AI.4687

Amount of Each Receipt this Period
250.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Deborah Dugan

Mailing Address 25 Hall Avenue

City State Zip Code
Watertown MA 02472

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Town of Watertown Election Commissioner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016

Transaction ID : SA11AI.4384

Amount of Each Receipt this Period
250.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
Deborah Dugan

Mailing Address 25 Hall Avenue

City State Zip Code
Watertown MA 02472

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Town of Watertown Election Commissioner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2016

Transaction ID : SA11AI.4750

Amount of Each Receipt this Period
250.00

Memo Item
Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Barbara & Bill Eames

Mailing Address 6 Cove Lane

City Whippany State NJ Zip Code 02561

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11AI.4890

Amount of Each Receipt this Period
100.00

Memo Item Donation

B. Full Name (Last, First, Middle Initial)
Vivian Ellis

Mailing Address PO Box 2005

City Teaticket State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 15 / 2016

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period
500.00

Memo Item Donation

C. Full Name (Last, First, Middle Initial)
David Ferrarini

Mailing Address 122 Magnet Way

City Brewster State MA Zip Code 02631

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11AI.4838

Amount of Each Receipt this Period
250.00

Memo Item Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Richard Gentile

Mailing Address 5 Live Oak Drive

City South Easton State MA Zip Code 02375

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation writer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11AI.4911

Amount of Each Receipt this Period
100.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Ed & Alice Grayson

Mailing Address PO Box 131

City West Falmouth State MA Zip Code 02574

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 22 / 2016

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period
1000.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Ed & Alice Grayson

Mailing Address PO Box 131

City West Falmouth State MA Zip Code 02574

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.4983

Amount of Each Receipt this Period
250.00

Memo Item
 In-kind -Reception expense

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Ed & Alice Grayson

Mailing Address **PO Box 131**

City **West Falmouth** State **MA** Zip Code **02574**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 26 / 2016

Transaction ID : SA11AI.4405

Amount of Each Receipt this Period
200.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Ed & Alice Grayson

Mailing Address **PO Box 131**

City **West Falmouth** State **MA** Zip Code **02574**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11AI.4894

Amount of Each Receipt this Period
250.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Kevin Grimes

Mailing Address **12 Clark Road**

City **Needham** State **MA** Zip Code **02492**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Grimes & Company** Occupation **president**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 15 / 2016

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period
250.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Larry Hallas

Mailing Address 1350 Wakeshire Terrace

City State Zip Code
Ballurn MO 63011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Almost Europe Adventure owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 20 / 2016

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
500.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Laurence Hallas

Mailing Address 1350 Wakeshire Terrace

City State Zip Code
Ballurn MO 63011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Almost Europe Adventures owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA11AI.4942

Amount of Each Receipt this Period
500.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
William Harkins

Mailing Address 660 Gifford Road

City State Zip Code
Westport MA 02790

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tabor Academy System Admin

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.4984

Amount of Each Receipt this Period
250.00

Memo Item
In-kind -Reception expense

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
William Harkins

Mailing Address 660 Gifford Road

City State Zip Code
Westport MA 02790

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tabor Academy System Admin

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016

Transaction ID : SA11AI.4416

Amount of Each Receipt this Period
100.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Sarah Jane Heath

Mailing Address PO Box 1847

City State Zip Code
North Falmouth MA 02556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
retired retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.4708

Amount of Each Receipt this Period
100.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
Erich Horgan

Mailing Address PO Box 203

City State Zip Code
Woods Hole MA 02543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WHOI research associate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4271

Amount of Each Receipt this Period
500.00

Memo Item
Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Kevin Hynes

Mailing Address 31 Forest St

City Kingston State MA Zip Code 02364

FEC ID number of contributing federal political committee. **C**

Name of Employer Boggey's Inc Occupation Restraunteur

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2016

Transaction ID : SA11AI.4763

Amount of Each Receipt this Period
500.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Tom Johnson

Mailing Address 2955 Herring Brook Rd

City Eastham State MA Zip Code 02360

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.4985

Amount of Each Receipt this Period
300.00

Memo Item
 In-kind -Harwich reception expense

C. Full Name (Last, First, Middle Initial)
Michael Kane

Mailing Address 162 Pond St

City Ashland State MA Zip Code 01721

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Builder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11AI.4864

Amount of Each Receipt this Period
250.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Andrea Keohane

Mailing Address 116 Falmouth Landing Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2016

Transaction ID : SA11AI.4187

Amount of Each Receipt this Period
 250.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Andrea Keohane

Mailing Address 116 Falmouth Landing Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.4987

Amount of Each Receipt this Period
 250.00

Memo Item
 In-kind -Reception expense

C. Full Name (Last, First, Middle Initial)
Andrea Keohane

Mailing Address 116 Falmouth Landing Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2016

Transaction ID : SA11AI.4390

Amount of Each Receipt this Period
 50.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Andrea Keohane

Mailing Address 116 Falmouth Landing Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : SA11AI.4489

Amount of Each Receipt this Period
 _____ 50.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Andrea Keohane

Mailing Address 116 Falmouth Landing Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11AI.4588

Amount of Each Receipt this Period
 _____ 50.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
Sheryl Kozens-Long

Mailing Address 49 Quimby Lane

City Waquoit State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation furniture retail

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2016

Transaction ID : SA11AI.4988

Amount of Each Receipt this Period
 _____ 400.00

Memo Item
In-kind -Fish fry expense

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
John Lawlor

Mailing Address 840 Central St

City East Bridgewater State MA Zip Code 02333

FEC ID number of contributing federal political committee. **C**

Name of Employer Automotion International inc Occupation president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 17 / 2016

Transaction ID : SA11AI.4789

Amount of Each Receipt this Period
500.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
John Lawlor

Mailing Address 840 Central St

City East Bridgewater State MA Zip Code 02333

FEC ID number of contributing federal political committee. **C**

Name of Employer Automotion International inc Occupation president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11AI.4990

Amount of Each Receipt this Period
300.00

Memo Item
 In-kind -Garage reception

C. Full Name (Last, First, Middle Initial)
Katherine Leisure

Mailing Address 16 Sanderson Road

City Plymouth State MA Zip Code 02360

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 29 / 2016

Transaction ID : SA11AI.4932

Amount of Each Receipt this Period
250.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Patricia Lindo

Mailing Address 360 Second St

City Fall River State MA Zip Code 02721

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11AI.4898

Amount of Each Receipt this Period
500.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Richard & Sheryl Long

Mailing Address 2 Galleon Drive

City Hatchville State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation furniture store owners

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 12 / 2016

Transaction ID : SA11AI.4336

Amount of Each Receipt this Period
350.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Leo Martin

Mailing Address 16 Nixon Ave

City Plymouth State MA Zip Code 02360

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation tourism

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11AI.4991

Amount of Each Receipt this Period
250.00

Memo Item
 In-kind -Jenney reception

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
David Mason

Mailing Address PO Box 694

City Cotuit State MA Zip Code 02635

FEC ID number of contributing federal political committee. **C**

Name of Employer UBS Occupation VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.4966

Amount of Each Receipt this Period
 250.00

Memo Item Donation

B. Full Name (Last, First, Middle Initial)
Fran Meany

Mailing Address 45 Bittersweet Lane

City Chatham State MA Zip Code 02650

FEC ID number of contributing federal political committee. **C**

Name of Employer Mintz Levin Occupation lawyer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period
 250.00

Memo Item Donation

C. Full Name (Last, First, Middle Initial)
Rick Merritt

Mailing Address 363 Cross St.

City Norwell State MA Zip Code 02061

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation construction

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : SA11AI.4485

Amount of Each Receipt this Period
 50.00

Memo Item Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. John Miller		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 14 / 2016
Mailing Address		Transaction ID : SA11AI.4127
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation lawyer	<input type="checkbox"/> Memo Item Donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Frederick Muzi		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 18 / 2016
Mailing Address 101Powissett St		Transaction ID : SA11AI.4820
City	State Zip Code	
Dover	MA 02030	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer retired	Occupation retired	<input type="checkbox"/> Memo Item Donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Matthew Nowick		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 29 / 2016
Mailing Address 122 Converse Rd.		Transaction ID : SA11AI.4265
City	State Zip Code	
Marion	MA 02738	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer Zipher Medical Affairs, LLC	Occupation Attorney	<input type="checkbox"/> Memo Item Donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Matthew Nowick

Mailing Address 122 Converse Rd.

City Marion State MA Zip Code 02738

FEC ID number of contributing federal political committee. **C**

Name of Employer Zipher Medical Affairs, LLC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **285.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.4733

Amount of Each Receipt this Period
 _____ 35.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Richard O'Connell

Mailing Address 390 Davisville Road

City East falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer GMG Insurance Agency Occupation director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.4946

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
Dick Padelford

Mailing Address PO Box 2490

City Nantucket State MA Zip Code 02584

FEC ID number of contributing federal political committee. **C**

Name of Employer Cortes Country Stores Occupation president

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 08 / 2016

Transaction ID : SA11AI.4115

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ **535.00**

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Alexander Panasyuk

Mailing Address 28 Saddle Club Road

City Lexington State MA Zip Code 02420

FEC ID number of contributing federal political committee. **C**

Name of Employer RMI Occupation CTO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016

Transaction ID : SA11AI.4678

Amount of Each Receipt this Period
 250.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Christopher Pereira

Mailing Address 602 Smith Neck Rd.

City South Dartmouth State MA Zip Code 02748

FEC ID number of contributing federal political committee. **C**

Name of Employer New Horizons Occupation sales executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.4993

Amount of Each Receipt this Period
 250.00

Memo Item
 In-kind -Reception expense

C. Full Name (Last, First, Middle Initial)
Alice Ramey

Mailing Address 141 Blake Rd

City Epping State NH Zip Code 03042

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : SA11AI.4867

Amount of Each Receipt this Period
 1000.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Allan Ramey

Mailing Address 141 Blake Rd.

City Epping State NH Zip Code 03042

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016

Transaction ID : SA11AI.4269

Amount of Each Receipt this Period
2000.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
Bruce Rogoff

Mailing Address 2 Dukes Road

City Wellesley State MA Zip Code 02481

FEC ID number of contributing federal political committee. **C**

Name of Employer The Staten Group Inc Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2016

Transaction ID : SA11AI.4829

Amount of Each Receipt this Period
500.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
Paul Sagan

Mailing Address 107 Valley Bars Road

City Cataumet State MA Zip Code 02534

FEC ID number of contributing federal political committee. **C**

Name of Employer KCSA Strtegic Communications Occupation VP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2016

Transaction ID : SA11AI.4994

Amount of Each Receipt this Period
2700.00

Memo Item
In-kind -

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Brenda Scannell

Mailing Address 15 Valley Road

City Falmouth State MA Zip Code 02540

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 07 / 2016

Transaction ID : SA11AI.4566

Amount of Each Receipt this Period
250.00

Memo Item Donation

B. Full Name (Last, First, Middle Initial)
Judith & Steven Shepley

Mailing Address PO Box 3

City Rochester State MA Zip Code 02770

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation mechanic

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11AI.4918

Amount of Each Receipt this Period
100.00

Memo Item Donation

C. Full Name (Last, First, Middle Initial)
Phyllis Sprout

Mailing Address 91 Quinaquisset Ave

City Mashpee State MA Zip Code 02649

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation farming

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 01 / 2016

Transaction ID : SA11AI.4611

Amount of Each Receipt this Period
200.00

Memo Item Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Phyllis Sprout

Mailing Address 91 Quinaquisset Ave

City Mashpee State MA Zip Code 02649

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation farming

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : SA11AI.4488

Amount of Each Receipt this Period
 _____ 50.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Phyllis Sprout

Mailing Address 91 Quinaquisset Ave

City Mashpee State MA Zip Code 02649

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation farming

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11AI.4996

Amount of Each Receipt this Period
 _____ 150.00

Memo Item
 In-kind -Reception expenses

C. Full Name (Last, First, Middle Initial)
Ed Stadelman

Mailing Address 23 Ben Davis Lane

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer American Airlines Occupation Pilot

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2016

Transaction ID : SA11AI.4701

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Gary Street

Mailing Address 49 Quimby Lane

City: Waquoit State: MA Zip Code: 02536

FEC ID number of contributing federal political committee: **C**

Name of Employer self Occupation: home builder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 02 / 18 / 2016

Transaction ID : SA11AI.4997

Amount of Each Receipt this Period: 250.00

Memo Item
In-kind -Reception expense

B. Full Name (Last, First, Middle Initial)
Elaine Taylor

Mailing Address 395 Moraine Street

City: Marshfield State: MA Zip Code: 02050

FEC ID number of contributing federal political committee: **C**

Name of Employer D.E.S.S. Computer Consulting Occupation: owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 02 / 19 / 2016

Transaction ID : SA11AI.4363

Amount of Each Receipt this Period: 350.00

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
Elaine Taylor

Mailing Address 395 Moraine Street

City: Marshfield State: MA Zip Code: 02050

FEC ID number of contributing federal political committee: **C**

Name of Employer D.E.S.S. Computer Consulting Occupation: owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 03 / 08 / 2016

Transaction ID : SA11AI.4606

Amount of Each Receipt this Period: 100.00

Memo Item
Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Leonard Taylor

Mailing Address 395 Moraine St

City Marshfield State MA Zip Code 02050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.4998

Amount of Each Receipt this Period
250.00

Memo Item
 In-kind -Reception expense

B. Full Name (Last, First, Middle Initial)
Leslie Tees

Mailing Address 201 Plymouth St

City Middleboro State MA Zip Code 02346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Cupecoy Enterprises owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 15 / 2016

Transaction ID : SA11AI.4760

Amount of Each Receipt this Period
250.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Lloyd Thompson

Mailing Address 88 Till Rock Lane

City Norwell State MA Zip Code 02061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 self marketing consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2625.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 01 / 2016

Transaction ID : SA11AI.5000

Amount of Each Receipt this Period
2625.00

Memo Item
 In-kind -

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3125.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Anthony & Silvia Tolentino

Mailing Address 9 Hamblin Point Road

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : SA11AI.4612

Amount of Each Receipt this Period
100.00

Memo Item Donation

B. Full Name (Last, First, Middle Initial)
Anthony & Silvia Tolentino

Mailing Address 9 Hamblin Point Road

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11AI.4912

Amount of Each Receipt this Period
150.00

Memo Item Donation

C. Full Name (Last, First, Middle Initial)
George Unhoch

Mailing Address PO Box 7072

City New Bedford State MA Zip Code 02742

FEC ID number of contributing federal political committee. **C**

Name of Employer New Bedford Thread Co, Inc. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 27 / 2016

Transaction ID : SA11AI.4199

Amount of Each Receipt this Period
500.00

Memo Item Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 93
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
George Unhoch

Mailing Address **PO Box 7072**

City **New Bedford** State **MA** Zip Code **02742**

FEC ID number of contributing federal political committee. **C**

Name of Employer **New Bedford Thread Co, Inc.** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2016

Transaction ID : SA11AI.4811

Amount of Each Receipt this Period
100.00

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
Sylvia Wahl

Mailing Address **31 Longhill Drive**

City **Sandwich** State **MA** Zip Code **02537**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 28 / 2016

Transaction ID : SA11AI.4229

Amount of Each Receipt this Period
200.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Sylvia Wahl

Mailing Address **31 Longhill Drive**

City **Sandwich** State **MA** Zip Code **02537**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : SA11AI.4480

Amount of Each Receipt this Period
100.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Sylvia Wahl

Mailing Address 31 Longhill Drive

City Sandwich State MA Zip Code 02537

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : SA11AI.4603

Amount of Each Receipt this Period
 200.00

Memo Item Donation

B. Full Name (Last, First, Middle Initial)
Ted Wahl

Mailing Address 31 Longhill Drive

City Sandwich State MA Zip Code 02537

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2016

Transaction ID : SA11AI.4927

Amount of Each Receipt this Period
 100.00

Memo Item Donation

C. Full Name (Last, First, Middle Initial)
David Weinstein

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2016

Transaction ID : SA11AI.4731

Amount of Each Receipt this Period
 500.00

Memo Item Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4731

No address provided

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Jaqueline Whetton

Mailing Address 91 Worcester Court

City Falmouth State MA Zip Code 02540

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SA11AI.4915

Amount of Each Receipt this Period
100.00

Memo Item Donation

B. Full Name (Last, First, Middle Initial)
Peter Winters

Mailing Address 854 Point Road

City Marion State MA Zip Code 02738

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.5004

Amount of Each Receipt this Period
250.00

Memo Item In-kind -Reception expense

C. Full Name (Last, First, Middle Initial)
Don Woodland

Mailing Address PO Box 1066

City Harwich State MA Zip Code 02645

FEC ID number of contributing federal political committee. **C**

Name of Employer Vitality Magazine Occupation publisher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : SA11AI.5006

Amount of Each Receipt this Period
400.00

Memo Item In-kind -Newspaper ad

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Alice Zinkevich

Mailing Address 36 Bluff Rd

City Sagamore State MA Zip Code 02561

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Hairstylist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **387.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2016

Transaction ID : SA11AI.5008

Amount of Each Receipt this Period
 204.83

Memo Item
 In-kind -12/15 Reception expense

B. Full Name (Last, First, Middle Initial)
Alice Zinkevich

Mailing Address 36 Bluff Rd

City Sagamore State MA Zip Code 02561

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Hairstylist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **397.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2016

Transaction ID : SA11AI.4801

Amount of Each Receipt this Period
 35.00

Memo Item
 Donation

C. Full Name (Last, First, Middle Initial)
Alice Zinkevich

Mailing Address 36 Bluff Rd

City Sagamore State MA Zip Code 02561

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Hairstylist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **422.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : SA11AI.4937

Amount of Each Receipt this Period
 25.00

Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

264.83

55904.70

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 93
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Committee to Elect Scott Lively

Mailing Address 9 Pheasant Drive

City Holyoke State MA Zip Code 01040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **852.34**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11B.5070

Amount of Each Receipt this Period
852.34

Memo Item
 Donation

B. Full Name (Last, First, Middle Initial)
The John WarginCommittee

Mailing Address 40 Captain Loring Lane

City Barnstable State MA Zip Code 02630

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2016

Transaction ID : SA11B.5074

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
The Tom Hodgson Committee

Mailing Address 158 Hathaway Road

City North Dartmouth State MA Zip Code 02747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2016

Transaction ID : SA11B.5072

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1002.34

1002.34

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11B

Transaction ID : SA11B.5070

Letter verifying Federally Permissible Funds.

Form/Schedule: SA11B

Transaction ID: SA11B.5074

Letter sent to verify Federally Permissible Funds. Non Federal office

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11B

Transaction ID : SA11B.5072

Letter sent to verify Federally Permissible Funds. Non Federal Office.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 93
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Falmouth Republican Town Committee

Mailing Address

City: Falmouth State: MA Zip Code: _____

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: **01 / 26 / 2016**

Transaction ID : SA11C.5148

Amount of Each Receipt this Period: **400.00**

Memo Item

B. Full Name (Last, First, Middle Initial)
MARA PAC

Mailing Address **PO Box 10486**

City: Holyoke State: MA Zip Code: 01041

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: **01 / 26 / 2016**

Transaction ID : SA11C.5067

Amount of Each Receipt this Period: **100.00**

Memo Item

C. Full Name (Last, First, Middle Initial)
MARA PAC

Mailing Address **PO Box 10486**

City: Holyoke State: MA Zip Code: 01041

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: **02 / 02 / 2016**

Transaction ID : SA11C.5063

Amount of Each Receipt this Period: **200.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : SA11C.5148

Letter sent to verify Federally Permissable Funds. Non Federal office

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
MARA PAC

Mailing Address **PO Box 10486**

City **Holyoke** State **MA** Zip Code **01041**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11C.5068

Amount of Each Receipt this Period
500.00

Memo Item
Donation

B. Full Name (Last, First, Middle Initial)
MARA PAC

Mailing Address **PO Box 10486**

City **Holyoke** State **MA** Zip Code **01041**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 15 / 2016

Transaction ID : SA11C.5065

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

1300.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : SA11C.5068

Original entry was a typo, \$500 donation not \$5000. Non Federal

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 93
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial)
Mark Alliegro

Mailing Address 41 Metoxit Rd.

City East Falmouth State MA Zip Code 02536

FEC ID number of contributing federal political committee. **C H4MA09052**

Name of Employer Self Employed Occupation Scientist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
14499.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SA13A.5058

Amount of Each Receipt this Period
12000.00

Memo Item
 Loan to campaign

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12000.00

12000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. Maria Batilo			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016		
Mailing Address 10 Southview Way			Amount of Each Disbursement this Period 250.00		
City East Falmouth	State MA	Zip Code 02536	Memo Item <input type="checkbox"/>		
Purpose of Disbursement In-kind -Reception expenses		Category/ Type			
Candidate Name		Transaction ID : SB17.5036			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Bond Printing			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2016		
Mailing Address PO Box 43			Amount of Each Disbursement this Period 781.32		
City Hanover	State MA	Zip Code 02339	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Marketing, Printing		Category/ Type			
Candidate Name		Transaction ID : SB17.5090			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Bond Printing			Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2016		
Mailing Address PO Box 43			Amount of Each Disbursement this Period 96.46		
City Hanover	State MA	Zip Code 02339	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Marketing, Printing		Category/ Type			
Candidate Name		Transaction ID : SB17.5114			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1127.78
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Bond Printing		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>06</td> <td></td> <td>2016</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		06		2016
M M	/	D D	/	Y Y Y Y									
02		06		2016									
Mailing Address PO Box 43		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Hanover</td> <td>MA</td> <td>02339</td> </tr> </table>		City	State	Zip Code	Hanover	MA	02339	<table border="1"> <tr> <td>1,000.00</td> <td>355.42</td> </tr> </table>		1,000.00	355.42		
City	State	Zip Code											
Hanover	MA	02339											
1,000.00	355.42												
Purpose of Disbursement Marketing, Printing		<input type="checkbox"/> Memo Item											
Candidate Name		Transaction ID : SB17.5109											
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Bond Printing		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>01</td> <td></td> <td>2016</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		01		2016
M M	/	D D	/	Y Y Y Y									
03		01		2016									
Mailing Address PO Box 43		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Hanover</td> <td>MA</td> <td>02339</td> </tr> </table>		City	State	Zip Code	Hanover	MA	02339	<table border="1"> <tr> <td>1,000.00</td> <td>255.84</td> </tr> </table>		1,000.00	255.84		
City	State	Zip Code											
Hanover	MA	02339											
1,000.00	255.84												
Purpose of Disbursement Marketing, Printing		<input type="checkbox"/> Memo Item											
Candidate Name		Transaction ID : SB17.5122											
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. Bond Printing		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>01</td> <td></td> <td>2016</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		01		2016
M M	/	D D	/	Y Y Y Y									
03		01		2016									
Mailing Address PO Box 43		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Hanover</td> <td>MA</td> <td>02339</td> </tr> </table>		City	State	Zip Code	Hanover	MA	02339	<table border="1"> <tr> <td>1,000.00</td> <td>1020.58</td> </tr> </table>		1,000.00	1020.58		
City	State	Zip Code											
Hanover	MA	02339											
1,000.00	1020.58												
Purpose of Disbursement Marketing, Printing		<input type="checkbox"/> Memo Item											
Candidate Name		Transaction ID : SB17.5123											
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016					
<input type="checkbox"/>	House												
<input type="checkbox"/>	Senate												
<input type="checkbox"/>	President												
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

SUBTOTAL of Disbursements This Page (optional).....	1631.84
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Bond Printing		M M / D D / Y Y Y Y 03 / 04 / 2016	
Mailing Address PO Box 43		Amount of Each Disbursement this Period	
City Hanover State MA Zip Code 02339		1233.47	
Purpose of Disbursement Marketing, Printing		<input type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : SB17.5124	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Bond Printing		M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address PO Box 43		Amount of Each Disbursement this Period	
City Hanover State MA Zip Code 02339		62.26	
Purpose of Disbursement Marketing, Printing		<input type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : SB17.5128	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Bond Printing		M M / D D / Y Y Y Y 03 / 18 / 2016	
Mailing Address PO Box 43		Amount of Each Disbursement this Period	
City Hanover State MA Zip Code 02339		365.47	
Purpose of Disbursement Marketing, Printing		<input type="checkbox"/> Memo Item	
Candidate Name		Transaction ID : SB17.5129	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1661.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. Bond Printing		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2016
Mailing Address PO Box 43		Amount of Each Disbursement this Period 304.31
City Hanover	State MA	
Zip Code 02339	Purpose of Disbursement Marketing, Printing	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.5132
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jeanette Carpentino		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2016
Mailing Address 256 Hillcrest Rd.		Amount of Each Disbursement this Period 261.13
City Marshfield	State MA	
Zip Code 02050	Purpose of Disbursement In-kind -Reception expenses	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.5034
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Christian Greve		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016
Mailing Address 285 Grove St		Amount of Each Disbursement this Period 2000.00
City Norwell	State MA	
Zip Code 02061	Purpose of Disbursement Field campaign manager	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17.5150
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2565.44
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 93		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. Christian Greve		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address 285 Grove St		Amount of Each Disbursement this Period 2143.00
City Norwell	State MA Zip Code 02061	
Purpose of Disbursement Campaign Field manager	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.5152

Full Name (Last, First, Middle Initial) B. Christian Greve		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016
Mailing Address 285 Grove St		Amount of Each Disbursement this Period 2143.00
City Norwell	State MA Zip Code 02061	
Purpose of Disbursement Campaign Field manager	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.5154

Full Name (Last, First, Middle Initial) c. Citizens Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016
Mailing Address PO Box 7000		Amount of Each Disbursement this Period 200.00
City Providence	State RI Zip Code 02940	
Purpose of Disbursement	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.5105

SUBTOTAL of Disbursements This Page (optional).....	4486.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. John Crawford			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016	
Mailing Address PO Box 181			Amount of Each Disbursement this Period 250.00	
City East Orleans	State MA	Zip Code 02643	Memo Item <input type="checkbox"/>	
Purpose of Disbursement In-kind -Reception expense		Candidate Name	Transaction ID : SB17.5033	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Category/Type		

Full Name (Last, First, Middle Initial) B. John Cullen			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016	
Mailing Address 63 Chandler Drive			Amount of Each Disbursement this Period 250.00	
City Marshfield	State MA	Zip Code 02050	Memo Item <input type="checkbox"/>	
Purpose of Disbursement In-kind -Reception event		Candidate Name	Transaction ID : SB17.5032	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Category/Type		

Full Name (Last, First, Middle Initial) c. Linda Davis			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016	
Mailing Address 383 Boxberry Hill Rd.			Amount of Each Disbursement this Period 250.00	
City East Falmouth	State MA	Zip Code 02536	Memo Item <input type="checkbox"/>	
Purpose of Disbursement In-kind -Reception event		Candidate Name	Transaction ID : SB17.5031	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Category/Type		

SUBTOTAL of Disbursements This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. Henry Dick			Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016		
Mailing Address 392 Boxberry Hill Rd.			Amount of Each Disbursement this Period 250.00		
City East Falmouth	State MA	Zip Code 02536	Memo Item <input type="checkbox"/>		
Purpose of Disbursement In-kind -		Category/ Type			
Candidate Name		Transaction ID : SB17.5030			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Digicert			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2015		
Mailing Address unknown			Amount of Each Disbursement this Period 315.00		
City unknown	State	Zip Code	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Campaign setup		Category/ Type			
Candidate Name		Transaction ID : SB17.5240			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Dr. Don's Buttons			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2015		
Mailing Address 3906 W. Morrow Drive			Amount of Each Disbursement this Period 406.88		
City Glendale	State AZ	Zip Code 85308	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Marketing		Category/ Type			
Candidate Name		Transaction ID : SB17.5214			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	971.88
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Ed & Alice Grayson		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016
Mailing Address PO Box 131		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.5029
City West Falmouth	State MA	
Zip Code 02574	Purpose of Disbursement In-kind -Reception expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. William Harkins		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016
Mailing Address 660 Gifford Road		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.5028
City Westport	State MA	
Zip Code 02790	Purpose of Disbursement In-kind -Reception expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Tom Johnson		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016
Mailing Address 2955 Herring Brook Rd		Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.5027
City Eastham	State MA	
Zip Code 02360	Purpose of Disbursement In-kind -Harwich reception expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. KCSA Strategic Communications		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2016
Mailing Address 880 Third Ave 6th floor		Amount of Each Disbursement this Period 6000.00
City New York	State NY	
Zip Code 10022	Purpose of Disbursement Strategic Communications, Campaign PR	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.5096
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. KCSA Strategic Communications		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address 880 Third Ave 6th floor		Amount of Each Disbursement this Period 6000.00
City New York	State NY	
Zip Code 10022	Purpose of Disbursement Strategic Communications, PR	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.5125
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Andrea Keohane		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016
Mailing Address 116 Falmouth Landing Rd.		Amount of Each Disbursement this Period 250.00
City East Falmouth	State MA	
Zip Code 02536	Purpose of Disbursement In-kind -Reception expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17.5026
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. Sheryl Kozens-Long			Date of Disbursement MM / DD / YYYY 02 / 19 / 2016		
Mailing Address 49 Quimby Lane			Amount of Each Disbursement this Period 400.00		
City Waquoit	State MA	Zip Code 02536	<input type="checkbox"/> Memo Item Transaction ID : SB17.5025		
Purpose of Disbursement In-kind -Fish fry expense		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. John Lawlor			Date of Disbursement MM / DD / YYYY 03 / 18 / 2016		
Mailing Address 840 Central St			Amount of Each Disbursement this Period 300.00		
City East Bridgewater	State MA	Zip Code 02333	<input type="checkbox"/> Memo Item Transaction ID : SB17.5024		
Purpose of Disbursement In-kind -Garage reception		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Lloyd F. Thompson			Date of Disbursement MM / DD / YYYY 01 / 04 / 2016		
Mailing Address 8 Till Rock Lane			Amount of Each Disbursement this Period 3500.00		
City Norwell	State MA	Zip Code 02061	<input type="checkbox"/> Memo Item Transaction ID : SB17.5092		
Purpose of Disbursement Campaign Consultation		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016			
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	4200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 93	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Lloyd F. Thompson			Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2016	
Mailing Address 8 Till Rock Lane			Amount of Each Disbursement this Period 63.75	
City Norwell	State MA	Zip Code 02061	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Marketing		Category/ Type		
Candidate Name		Transaction ID : SB17.5110		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Lloyd F. Thompson			Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2016	
Mailing Address 8 Till Rock Lane			Amount of Each Disbursement this Period 1750.00	
City Norwell	State MA	Zip Code 02061	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Marketing and managing campaign event		Category/ Type		
Candidate Name		Transaction ID : SB17.5108		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Leo Martin			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016	
Mailing Address 16 Nixon Ave			Amount of Each Disbursement this Period 250.00	
City Plymouth	State MA	Zip Code 02360	Memo Item <input type="checkbox"/>	
Purpose of Disbursement In-kind -Jenney reception		Category/ Type		
Candidate Name		Transaction ID : SB17.5023		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2063.75
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Nationbuilder			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2016
Mailing Address 2520 S Grand Ave			Amount of Each Disbursement this Period 199.00
City Los Angeles	State CA	Zip Code 90071	
Purpose of Disbursement Campaign set up		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.5164
State: District:			

Full Name (Last, First, Middle Initial) B. Nationbuilder			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016
Mailing Address 2520 S Grand Ave			Amount of Each Disbursement this Period 199.00
City Los Angeles	State CA	Zip Code 90071	
Purpose of Disbursement Campaign set up		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.5165
State: District:			

Full Name (Last, First, Middle Initial) C. Nationbuilder			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2016
Mailing Address 2520 S Grand Ave			Amount of Each Disbursement this Period 199.00
City Los Angeles	State CA	Zip Code 90071	
Purpose of Disbursement Websit set up		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.5173
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	597.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Nationbuilder			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2016	
Mailing Address 2520 S Grand Ave			Amount of Each Disbursement this Period 199.00	
City Los Angeles	State CA	Zip Code 90071	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Website		Category/ Type		
Candidate Name		Transaction ID : SB17.5175		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Christopher Pereira			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016	
Mailing Address 602 Smith Neck Rd.			Amount of Each Disbursement this Period 250.00	
City South Dartmouth	State MA	Zip Code 02748	Memo Item <input type="checkbox"/>	
Purpose of Disbursement In-kind -Reception expense		Category/ Type		
Candidate Name		Transaction ID : SB17.5022		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Paul Sagan			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016	
Mailing Address 107 Valley Bars Road			Amount of Each Disbursement this Period 2700.00	
City Cataumet	State MA	Zip Code 02534	Memo Item <input type="checkbox"/>	
Purpose of Disbursement In-kind -		Category/ Type		
Candidate Name		Transaction ID : SB17.5021		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3149.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. Salem Media Group			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2016		
Mailing Address 500 Victory Road Second floor			Amount of Each Disbursement this Period 2500.00		
City Quincy	State MA	Zip Code 02171	<input type="checkbox"/> Memo Item		
Purpose of Disbursement Radio air time		Category/ Type	Transaction ID : SB17.5115		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Gary Street			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016		
Mailing Address 49 Quimby Lane			Amount of Each Disbursement this Period 250.00		
City Waquoit	State MA	Zip Code 02536	<input type="checkbox"/> Memo Item		
Purpose of Disbursement In-kind -Reception expense		Category/ Type	Transaction ID : SB17.5019		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Leonard Taylor			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016		
Mailing Address 395 Moraine St			Amount of Each Disbursement this Period 250.00		
City Marshfield	State MA	Zip Code 02050	<input type="checkbox"/> Memo Item		
Purpose of Disbursement In-kind -Reception expense		Category/ Type	Transaction ID : SB17.5018		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. The Olde Hitching Post			Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2016		
Mailing Address 48 Spring St			Amount of Each Disbursement this Period 278.75		
City Hanson	State MA	Zip Code 02341	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Fundraising event		Category/ Type			
Candidate Name		Transaction ID : SB17.5100			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. The Olde Hitching Post			Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2016		
Mailing Address 48 Spring St			Amount of Each Disbursement this Period 100.00		
City Hanson	State MA	Zip Code 02341	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Event space fee		Category/ Type			
Candidate Name		Transaction ID : SB17.5112			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Lloyd Thompson			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016		
Mailing Address 88 Till Rock Lane			Amount of Each Disbursement this Period 2625.00		
City Norwell	State MA	Zip Code 02061	Memo Item <input type="checkbox"/>		
Purpose of Disbursement In-kind -		Category/ Type			
Candidate Name		Transaction ID : SB17.5017			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	3003.75
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. Tuesday Associates		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2016
Mailing Address 60 New Driftway Suite 18		Amount of Each Disbursement this Period 600.00
City Scituate	State MA Zip Code 02066	
Purpose of Disbursement Campaign fundraising	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.5094

Full Name (Last, First, Middle Initial) B. Tuesday Associates		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016
Mailing Address 60 New Driftway Suite 18		Amount of Each Disbursement this Period 1000.00
City Scituate	State MA Zip Code 02066	
Purpose of Disbursement Campaign Fundraising	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.5107

Full Name (Last, First, Middle Initial) C. Tuesday Associates		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2016
Mailing Address 60 New Driftway Suite 18		Amount of Each Disbursement this Period 383.25
City Scituate	State MA Zip Code 02066	
Purpose of Disbursement Campaign Fundraising	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.5113

SUBTOTAL of Disbursements This Page (optional).....	1983.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. Tuesday Associates		Date of Disbursement MM / DD / YYYY 02 / 17 / 2016
Mailing Address 60 New Driftway Suite 18		Amount of Each Disbursement this Period 830.85
City Scituate	State MA Zip Code 02066	
Purpose of Disbursement Campaign fundraising	Candidate Name	<input type="checkbox"/> Memo Item Transaction ID : SB17.5111
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Tuesday Associates		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address 60 New Driftway Suite 18		Amount of Each Disbursement this Period 843.02
City Scituate	State MA Zip Code 02066	
Purpose of Disbursement Campaign fundraising	Candidate Name	<input type="checkbox"/> Memo Item Transaction ID : SB17.5126
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Tuesday Associates		Date of Disbursement MM / DD / YYYY 03 / 10 / 2016
Mailing Address 60 New Driftway Suite 18		Amount of Each Disbursement this Period 1000.00
City Scituate	State MA Zip Code 02066	
Purpose of Disbursement Campaign fundraising	Candidate Name	<input type="checkbox"/> Memo Item Transaction ID : SB17.5127
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	2673.87
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5111

Election year 2016

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliego

Full Name (Last, First, Middle Initial) A. Tuesday Associates		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2016
Mailing Address 60 New Driftway Suite 18		Amount of Each Disbursement this Period 740.84
City Scituate	State MA Zip Code 02066	
Purpose of Disbursement Campaign fundraising	Candidate Name	<input type="checkbox"/> Memo Item Transaction ID : SB17.5131
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Tuesday Associates		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2016
Mailing Address 60 New Driftway Suite 18		Amount of Each Disbursement this Period 450.96
City Scituate	State MA Zip Code 02066	
Purpose of Disbursement Campaign fundraising	Candidate Name	<input type="checkbox"/> Memo Item Transaction ID : SB17.5133
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Tuesday Associates		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2016
Mailing Address 60 New Driftway Suite 18		Amount of Each Disbursement this Period 344.03
City Scituate	State MA Zip Code 02066	
Purpose of Disbursement Campaign fundraising	Candidate Name	<input type="checkbox"/> Memo Item Transaction ID : SB17.5134
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1535.83
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USPS		M M / D D / Y Y Y Y 12 / 04 / 2015
Mailing Address 451 E Falmouth Highway		Amount of Each Disbursement this Period
City East Falmouth	State MA	Zip Code 02536
Purpose of Disbursement Postage	Category/Type	
Candidate Name Committee to Elect Mark Alliegro	Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: MA	District: 09	
		Transaction ID : SB17.5215

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USPS		M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 451 E Falmouth Highway		Amount of Each Disbursement this Period
City East Falmouth	State MA	Zip Code 02536
Purpose of Disbursement Postage	Category/Type	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State:	District:	
		Transaction ID : SB17.5218

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. USPS		M M / D D / Y Y Y Y 12 / 29 / 2015
Mailing Address 451 E Falmouth Highway		Amount of Each Disbursement this Period
City East Falmouth	State MA	Zip Code 02536
Purpose of Disbursement Postage	Category/Type	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State:	District:	
		Transaction ID : SB17.5219

SUBTOTAL of Disbursements This Page (optional).....	63.13
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement
Mailing Address 451 E Falmouth Highway		M M / D D / Y Y Y Y 01 / 04 / 2016
City East Falmouth	State MA	Zip Code 02536
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 55.75
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5076
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement
Mailing Address 451 E Falmouth Highway		M M / D D / Y Y Y Y 01 / 05 / 2016
City East Falmouth	State MA	Zip Code 02536
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 5.75
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5078
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement
Mailing Address 451 E Falmouth Highway		M M / D D / Y Y Y Y 01 / 19 / 2016
City East Falmouth	State MA	Zip Code 02536
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 5.75
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5079
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	67.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. USPS		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>02 / 08 / 2016</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		02 / 08 / 2016							
M M / D D / Y Y Y Y													
02 / 08 / 2016													
Mailing Address 451 E Falmouth Highway		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>East Falmouth</td> <td>MA</td> <td>02536</td> </tr> </table>		City	State	Zip Code	East Falmouth	MA	02536	<table border="1"> <tr> <td>Amount</td> <td></td> </tr> <tr> <td>29.40</td> <td></td> </tr> </table>		Amount		29.40	
City	State	Zip Code											
East Falmouth	MA	02536											
Amount													
29.40													
Purpose of Disbursement Postage		<input type="checkbox"/> Memo Item											
Candidate Name		Transaction ID : SB17.5102											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. USPS		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>03 / 08 / 2016</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		03 / 08 / 2016							
M M / D D / Y Y Y Y													
03 / 08 / 2016													
Mailing Address 451 E Falmouth Highway		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>East Falmouth</td> <td>MA</td> <td>02536</td> </tr> </table>		City	State	Zip Code	East Falmouth	MA	02536	<table border="1"> <tr> <td>Amount</td> <td></td> </tr> <tr> <td>29.40</td> <td></td> </tr> </table>		Amount		29.40	
City	State	Zip Code											
East Falmouth	MA	02536											
Amount													
29.40													
Purpose of Disbursement Postage		<input type="checkbox"/> Memo Item											
Candidate Name		Transaction ID : SB17.5117											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. USPS		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>03 / 23 / 2016</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		03 / 23 / 2016							
M M / D D / Y Y Y Y													
03 / 23 / 2016													
Mailing Address 451 E Falmouth Highway		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>East Falmouth</td> <td>MA</td> <td>02536</td> </tr> </table>		City	State	Zip Code	East Falmouth	MA	02536	<table border="1"> <tr> <td>Amount</td> <td></td> </tr> <tr> <td>19.60</td> <td></td> </tr> </table>		Amount		19.60	
City	State	Zip Code											
East Falmouth	MA	02536											
Amount													
19.60													
Purpose of Disbursement Postage		<input type="checkbox"/> Memo Item											
Candidate Name		Transaction ID : SB17.5118											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	78.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 93	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2016
Mailing Address 451 E Falmouth Highway		Amount of Each Disbursement this Period 19.60
City East Falmouth	State MA Zip Code 02536	
Purpose of Disbursement Postage	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.5119

Full Name (Last, First, Middle Initial) B. Verticalresponse		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016
Mailing Address 50 Beale St 10th floor		Amount of Each Disbursement this Period 51.00
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Website	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.5172

Full Name (Last, First, Middle Initial) c. VictoryStore.com		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 5200 30th St SW		Amount of Each Disbursement this Period 444.32
City Davenport	State IA Zip Code 52802	
Purpose of Disbursement Marketing	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : SB17.5217

SUBTOTAL of Disbursements This Page (optional).....	514.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 93			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Peter Winters			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016		
Mailing Address 854 Point Road			Amount of Each Disbursement this Period 250.00		
City Marion	State MA	Zip Code 02738	Memo Item <input type="checkbox"/>		
Purpose of Disbursement In-kind -Reception expense		Category/ Type			
Candidate Name		Transaction ID : SB17.5015			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Don Woodland			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2016		
Mailing Address PO Box 1066			Amount of Each Disbursement this Period 400.00		
City Harwich	State MA	Zip Code 02645	Memo Item <input type="checkbox"/>		
Purpose of Disbursement In-kind -Newspaper ad		Category/ Type			
Candidate Name		Transaction ID : SB17.5014			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Alice Zinkevich			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2016		
Mailing Address 36 Bluff Rd			Amount of Each Disbursement this Period 107.21		
City Sagamore	State MA	Zip Code 02561	Memo Item <input type="checkbox"/>		
Purpose of Disbursement In-kind -		Category/ Type			
Candidate Name		Transaction ID : SB17.5012			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	757.21
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 93			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Alice Zinkevich			Date of Disbursement MM / DD / YYYY 02 / 18 / 2016		
Mailing Address 36 Bluff Rd			Amount of Each Disbursement this Period 204.83		
City Sagamore	State MA	Zip Code 02561	<input type="checkbox"/> Memo Item Transaction ID : SB17.5013		
Purpose of Disbursement In-kind -12/15 Reception expense		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement MM / DD / YYYY		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
Purpose of Disbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement MM / DD / YYYY		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
Purpose of Disbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional)	204.83
TOTAL This Period (last page this line number only)	50136.33

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 93			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Mark Alliegro

Full Name (Last, First, Middle Initial) A. Alice Zinkevich			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016		
Mailing Address 36 Bluff Rd			Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Memo Item Transaction ID : SB20A.5160		
City Sagamore	State MA	Zip Code 02561			
Purpose of Disbursement Refund of deposit for event		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:					

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item		
City	State	Zip Code			
Purpose of Disbursement		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item		
City	State	Zip Code			
Purpose of Disbursement		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	25.00
TOTAL This Period (last page this line number only).....	25.00

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5058

Committee to Elect Mark Alliegro

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item

Mark Alliegro

Election: 2016

Primary
 General
 Other (specify) ▼

Mailing Address
41 Metoxit Rd.

City State ZIP Code
East Falmouth MA 02536

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
12000.00	0.00	12000.00

TERMS

Date Incurred: M 03 / D 30 / Y 2016
 Date Due: M / D / Y none
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	12000.00
TOTALS This Period (last page in this line only).....	▶	12000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Committee to Elect Mark Alliegro

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mark Alliegro

Mailing Address 41 Metoxit Rd.

City State Zip Code
 East Falmouth MA 02536

Nature of Debt (Purpose):
 Radio time, Filing Fees, Strategic Communications, Facebook

Outstanding Balance Beginning This Period	Transaction ID : SD10.5270	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
14404.00	0.00	14404.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	14404.00
2) TOTALS This Period (last page this line number only)	14404.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	12000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	26404.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.5270

Due to data misentry this transaction was entered as loan from candidate.

Form/Schedule:

Transaction ID: